PROCEDURE FOR FILING FICTITIOUS NAME CERTIFICATE

- 1. This certificate is being filed in accordance with Title 6 <u>Del. C.</u> Chapter 31. The applicant must bear primary responsibility for determining whether there is in existence any other business or organization utilizing the same fictitious name. The acceptance and recording of a fictitious name certificate in the Prothonotary's Office shall in no way be deemed a warranty of the applicant's right to operate under the name registered.
- 2. Make sure the form is complete and the information is accurate.
- 3. After the form is completed, please return it to the cashier for processing. If you are returning it by mail, be sure that it is notarized. Please enclose a stamped, self-addressed envelope so that we may send you a certified copy as proof of filing for your records. To register in New Castle County, mail the completed form to:

New Castle County Prothonotary 500 N. King Street Suite 500, Lower Level 1 Wilmington, DE 19801-3746

- 4. The filing fee is \$25.00. Your check or money order should be made payable to the "Prothonotary".
- 5. If you sell, change the name, or in any other way change the status of the business, you should notify this office.
- 6. The filing of the document covers only New Castle County. Pursuant to Title 6 <u>Del.</u> <u>C.</u> Chapter 31, § 3101 and § 3103, if you are going to do business in Kent or Sussex County, you will need to register with the respective Prothonotary's Office in each county.

Kent County Prothonotary 38 The Green Dover, DE 19901 (302) 739-3184 Sussex County Prothonotary P.O. Box 756 Georgetown, DE 19947 (302) 856-5742

7. This registration of a Trade (fictitious) name with this office has no connection with the need for a license to do business in Delaware. Applications for a Delaware Business License are available at the Division of Revenue, State of Delaware, Carvel State Building, 8th & French Streets, Wilmington, DE 19801 (302) 577-5800.

NEW CASTLE COUNTY REGISTRATION OF TRADE NAMES PARTNERSHIPS & ASSOCIATIONS

TRADE NAME	i:				
Business Add	ress:				
				Phone Number	
Title of Perso	n, Firm or	Association(Parer	nt Company,		
Names and a	ddresses o	of <u>all</u> owners, me	embers, or	partners comprising the firm:	
Last Name		First Name		Address	
Date of Form	ation:				
Nature of Bus	siness:				
STATE OF DE NEW CASTLE					
BEFOR	RE ME the	e Subscriber a	Notary Pi	ublic of the State of Delaware, personally	
	·	•	•	al in the business described in the foregoing	
				cording to law did depose and say as follows:	
1.	He/She is a principal in the business described in the foregoing certificate.				
2.	That the foregoing information provided in the foregoing certificate is true,				
	correct, a	nd complete.			
				 Affiant	
				Title:	
SWORN AND	SUBSCRIE	BED this	day of		
				Notary Public	